



# APPLICATION FOR SWIMMING POOL PERMIT

## Environmental Health Division

Ada & Boise County  
707 N. Armstrong Pl.  
Boise, ID 83704-0825  
Ph. 327-7499

Elmore County  
520 E. 8th St. North  
Mountain Home, ID, 83647  
Ph. 587-9225

Valley County  
703 N. 1st  
P.O. Box 1448  
McCall, ID 83638  
Ph. 634-7194

For office use only	
Permit #	Receipt #
Date:	Received by

This application is for a: ☐ New pool plan review ☐ Permit renewal ☐ Approved ☐ Disapproved

Name of Pool:			
Pool Address:	City:	State:	Zip:
Name of Pool Manager:			
Address:	City:	State:	Zip:
Parent Company:			
Address:	City:	State:	Zip:
Type Pool: <input type="checkbox"/> Seasonal <input type="checkbox"/> Year Round			
Water Supply: <input type="checkbox"/> Public <input type="checkbox"/> Private Well <input type="checkbox"/> Other _____			
Sewage Disposal: <input type="checkbox"/> Public <input type="checkbox"/> Septic System			
Anticipated Opening Date:			
Pool Size (gal.):		Max Bather Load:	
6 Hour Turnover: _____ gpm		8 Hour Turnover: _____ gpm	
Pool Operators:			
Name: _____		Address: _____	
Name: _____		Address: _____	
Name: _____		Address: _____	

*I understand that this permit is not transferable and is based upon compliance with all Health Regulations of the State of Idaho determined on the basis of an inspection by the Local or State Health Authority and may be revoked for violation of such regulations.*

Signed: \_\_\_\_\_  
(owner/permitee) Date

Signed: \_\_\_\_\_  
(EHS) Date: